Va. DMHMRSAS Pharmacy, Therapeutics and Formulary Committee Conflict of Interest Disclosure Summary Statement

The following information is presented on behalf of the Va. DMHMRSAS Pharmacy, Therapeutics and Formulary Committee regarding any personal financial relationships committee members and or their spouse/partner currently hold, or have held, within the last 12 months with commercial interests that manufacture or provide goods or services which are related to the subject of their participation on this committee and could potentially be perceived as conflict of interest.

Note: Refusal to provide this disclosure will disqualify members from participating in any activity that may be affected by such non disclosure.

PART 1: DISCLOSURE STATEMENT

I have no financial relationship with any commercial interests to disclose as noted. I hereby certify that I am free from any conflict of interest in ADMINISTERING or delivering Medicare Part D benefits. *Examples may include, (but not limited to), proprietary, financial, professional, or other personal interest of any nature or kind with any product, service or company that could be construed as influencing the delivery of the Medicare Part D program.*

Proceed to part 3

-Or-

I HEREBY DISCLOSE THE FOLLOWING INCLUDING FINANCIAL RELATIONSHIPS:

Proceed to part 2

PART 2: NATURE OF THE RELATIONSHIP(S)

The nature of the relationship will be noted in the attached table, (Employee, Grants/Research Support Recipient, Board Member, Advisor or Review Panel member, Consultant, Independent Contractor, Stock Shareholder [over \$5000/excluding mutual funds], Speakers' Bureau, Honorarium Recipient, Royalty/Gift Recipient [exceeding \$100], Holder of Intellectual Property Rights, or Other [describe]).

PART 3: IDENTIFICATION.

All required disclosures have been identified. Each member understands that it is their continuing obligation to provide disclosure of potential conflicts of interest. If he or she becomes aware of any specific conflicts, or if there is a change in professional activities, financial interests, or employment, he or she will notify the committee and submit an updated Conflict of Interest / Disclosure form while acting as a state representative on the Va. DMHMRSAS Pharmacy, Therapeutics and Formulary Committee.

EACH MEMBER WILL UPHOLD ACADEMIC STANDARDS TO INSURE BALANCE, INDEPENDENCE, OBJECTIVITY, AND SCIENTIFIC RIGOR IN THEIR ROLE ON THIS COMMITTEE AND WILL SUPPORT CONTENT AND CLINICAL RECOMMENDATIONS WITH THE BEST EVIDENCE AVAILABLE FROM REPUTABLE SOURCES.

The following is a list of the relevant relationships of Committee members: 2008

FN Member [2008]	LN Member [2008]	Title [*DMHMRSAS]	*Pharma Co. Reference Code	Nature of Relationship
George	Braunstein	Chesterfield CSB Executive Director	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
James	Evans	* Medical Director	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Robert	Gardella	* WSH Forensic Admissions, Psychiatrist; DMHMRSAS CME Director	3, 7, 8, 12	Speakers' Bureau; Honorarium Recipient; I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Colton	Hand	Fairfax CSB Medical Director	7, 8,12,15	Stock Shareholder (over \$5000/excluding mutual funds), I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Pam	Hendrick	* CRP Pharmacy Manager	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
John	Jackson	* Reimbursement Director	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Michael	Jones	* Clinical Pharmacist; Catawba	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Kent	McDaniel	Henrico CSB Medical Director	3, 7, 15	Speakers' Bureau; Honorarium Recipient; I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Asha	Mishra	Chesterfield CSB Medical Director	3, 15	Speakers' Bureau; Honorarium Recipient; I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Kirk	Morton	RBHA, Medication Access Team Leader	3, 12	Speakers' Bureau; Honorarium Recipient; I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Priscilla	Scherger	*Director of Facility Operations and Quality Improvement	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Margaret	Sellers	Hanover CSB Clinical Director	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.

FN Member [2008]	LN Member [2008]	Title [*DMHMRSAS]	*Pharma Co. Reference Code	Nature of Relationship
Marina	Sinyard	Crossroads CSB, Director of Long Term Care	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
James	Stone	* Data Analyst Pharmacy Services	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Frank	Tetrick	* Commissioner Community Services	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Michele	Thomas	* Pharmacy Services Mgr.	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Chuck	Walsh	Middle Peninsula CSB Executive Director	N/A	I have no financial relationship with any commercial interests to disclose. I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.
Joy	Yeh	* Commissioner of Finance	12, 13, 15, 16	Stock Shareholder (over \$5000/excluding mutual funds); I certify I am free from any conflict of interest in administering or delivering Medicare Part D benefits.

^{*}Schedule Reference: Numeric Code, followed by Pharmaceutical ("Pharma") company name.

^{1.} Abbott Laboratories; 2. Amgen; 3. AstraZeneca; 4.Baxter International; 5.Bayer; 6. Boehringer Ingelheim; 7. Bristol-Myers Squibb; 8. Eli Lilly and Co.; 9.Genentech; 10. GlaxoSmithKline; 11. Hoffmann–La Roche; 12. Johnson and Johnson; 13. Merck & Co.; 14.Novartis; 15. Pfizer; 16. Procter & Gamble; 17. Sanofi-Aventis; 18.Schering-Plough; 19. Takeda Pharmaceutical Co.; 20. Wyeth; 21.Other [Describe];

N/A - I have no financial relationship with any commercial interests to disclose. I hereby certify that I am free from any conflict of interest in ADMINISTERING or delivering Medicare Part D benefits. Examples may include, (but not limited to), proprietary, financial, professional, or other personal interest of any nature or kind with any product, service or company that could be construed as influencing the delivery of the Medicare Part D program.